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## RECORDATION FORM COVER SHEET

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Attorney Docket Nos. 55525-8049.US00

## PATENTS ONLY

To the Honorable Assistant Commissioner for Patents: Please record the attached original documents or copy thereof			
1.	Name of conveying party(ies): Lynx Therapeutics, Inc. 25861 Industrial Blvd. Hayward, CA 94545	<ol> <li>Name/address of receiving party: Solexa, Inc.</li> <li>25861 Industrial Blvd.</li> <li>Hayward, CA 94545</li> </ol>	
·	Add'l names of conveying parties attached?	Add'l names of receiving parties attached?   Yes  No	
3.	Nature of conveyance:   Assignment	4. Date of execution: 01/02/02.	
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5.	Application number(s) and/or pater If this document is being filed by the first named inventor was:	number(s)  new application, the date of signature	
	A. Patent Application No.(s) 09/967,238 filed on 09/27/2001	Corresponding Patent No.(s)	
	Additional numbers attached: 🗆 Yes 🛛 No		
6.	Name and address of party to whom correspondence concerning document should be mailed:	7. Total No. of applications and patents involved: One (1)	
	Perkins Coie LLP	8. Total fee (37 CFR §3.41): <b>\$40.00</b>	
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